CERTIFICATE OF FACSIMILE TRANSMISSION 37 C.F.R. 1.6 & 1.8
I CERTIFY THAT THIS CORRESPONDENCE IS BEING TRANSMITTED BY FACSIMILE TO THE PATENT
AND TRADEMARK OFFICE ON THE DATE AND TO THE NUMBER SHOWN BELOW. FAX. NO. 703-872-
9306 COMPRISING THIRTEEN (13) SHEETS INCLUDING THIS PAGE.

Date: August 3, 2004

Samuel W. Apicelli
Reg. No. 36,427

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No.	:	10/823,902
Applicant	:	Gardner, Jr. et al.
Filed	:	Herewith
Title	:	METHOD FOR DETECTION OF PATHOGENIC MICROORGANISMS
TC/A.U.	:	2877
Examiner	:	Evans, Fannie L
Docket No.	:	E2079-00006

Fee Only

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

PRELIMINARY AMENDMENT

Sir:

Preliminary to the examination of the above-identified Continuation

Application, please amend the Application as follows:

Amendment to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims which

begins on page 3 of this paper.

Remarks/Arguments begin on page 11 of this paper.

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2003

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	56	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	56 minus 20=	36
INDEPENDENT CLAIMS	2 minus 3 =	0
MULTIPLE DEPENDENT CLAIM PRESENT		☐

SMALL ENTITY TYPE ☐ OR **OTHER THAN SMALL ENTITY**

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	FEE		RATE	FEE
BASIC FEE	385.00	OR	BASIC FEE	770.00
XS 9=		OR	XS18=	324
X43=		OR	X86=	—
+145=		OR	+290=	—
TOTAL		OR	TOTAL	709

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	28	Minus	56	=
Independent	4	Minus	3	= 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X43=	43	OR	X86=	~~86~~
+145=		OR	+290=	
TOTAL ADDIT. FEE	43	OR	TOTAL ADDIT. FEE	~~86~~

Paid

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X43=		OR	X86=	
+145=		OR	+290=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X43=		OR	X86=	
+145=		OR	+290=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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